05-02-06

PART B - FEE(S) TRANSMITTAL

				r.O. Box 1450	Alexandria, Virginia 22313-1450		
INSTRUCTIONS: This form stiglid be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated the second correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance and office the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance and office the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance and office the current correspondence address.							
CURRENT CORREST SABENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 02/08/2006				Note: A certificate of Fee(s) Transmittal. Th	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
				I hereby certify that the States Postal Service vaddressed to the Mail	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
Troy, MI 48007-5052				<u> </u>	Susar Orisha (Depositor's name) Susar Graham (Signature) 5-1-06 (Date)		
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/775,399 02/10/2004 Patrick N. Hop TITLE OF INVENTION: REVERSED DECOUPLER ASSEMBLY FOR MR MOUNT				opkins 05/03/2006 CCHA	DP-310788	8869 10775399	
1				02 FC:8001	1400.00 DA 6.00 DA		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	05/08/2006	
		ART UNIT		CLASS-SUBCLASS			
NGUYEN, XUAN LAN T 3683				188-267000			
CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicate	e address or indication of "Follence address (or Change of 22) attached. cion (or "Fee Address" Indicator more recent) attached. Use	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
DELPHI TECHNOLOGIES, INC.				TROY, MICH	TROY, MICHIGAN		
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):							
				the amount of the fee(s) is en- credit card. Form PTO-2038			
Advance Order - # of Copies The Director is hereby authorized by charge the required Deposit Account Number Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by charge the required Deposit Account Number The Director is hereby authorized by the						edit any overpayment, to	
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature Susa Grasha Date 5-1-06							
Typed or printed name Susah 6 rusha Registration No							
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.							
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